

ECS Configuration Change Request

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CCR No.	96-0632	Logged Date	6/11/96	Rev.		Request Type	
Priority	Routine <input type="checkbox"/>	Urgent <input type="checkbox"/>	Emergency <input checked="" type="checkbox"/>	Affected Release		Change Class	
Title (description) DCE/OODCE upgrade on HP							
Documents Affected				Source Nos (RID, NCR, etc.) or Tech Reference			
RTM Change <input type="checkbox"/> Start New Baseline <input type="checkbox"/>							
Problem 1) Obtained patches DCE and OODCE patches for HP from HP. 2) Obtained a new copy of the OODCE for HP and expecting a new copy of OODCE for the SUN from HP. 3) Need to collect audit information about ftp service on SGIs for ftp notifications.							
Proposed Solution 1) Install DCE and OODCE patches #PHSS-5861 & #PHSS-6922. 2) Install new OODCE on HP (duece) and SUN (casper) on their local directories so CSS/MSS can test and then mount it centrally so it is available for general use. 3) Turn on the audit (possibly in the kernel) on lucy to collect audit information about ftp.							
Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ESO <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input type="checkbox"/> QA <input type="checkbox"/> Rel. A <input checked="" type="checkbox"/> Rel. B <input type="checkbox"/> Rel. IR1 <input type="checkbox"/> MRS <input checked="" type="checkbox"/> SMO <input type="checkbox"/> Subconcs <input type="checkbox"/> Other _____ Cost: None <input checked="" type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000) Schedule: None <input type="checkbox"/> Other ASAP Additional LOC _____ Man-Months _____ Materials _____							
Originator <u>Rebecca Baker</u> _____ Signature _____ Date _____							
Office _____ Office Manager _____ Signature _____ Date _____							
Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/>							
Comments: CCB Chairperson _____ Signature _____ Date _____							

